Notice of Exempt
Offering of Securities

U.S. Securities and Exchange Communication

Washington, DC 20549

(See instructions beginning on page 5) LC 10 2008

1335294 OMB APPROVAL

OMB Number: 3235-0076

Expires: December 31, 2008

Estimated average burden hours per response: 4.00

Intentional misstatements or tem 1. Issuer's Identity	omissions of fact const	itute federal criminal vio Vas	lations. See 18 U.S.C. 1001. inington, DC 110		
Name of Issuer	Previous Name(s)	None	Entity Type (Select one)		
KeyOn Communications Holdings, Inc.	Flevious Haine(s)		Corporation		
Jurisdiction of Incorporation/Organization			Limited Partnership		
Delaware		PROCESS	Limited Liability Company General Partnership		
Year of Incorporation/Organization (Select one)		DEC 2 4 26	Business Trust Other (Specify)		
O O - 5' - V A Within Last Five Years	2007 C Yes	' 'THOWSON RE			
(If more than one issuer is filing this notice, check t	his box 🔲 and identify	additional issuer(s) by a	attaching items 1 and 2 Continuation Page(s).		
tem 2. Principal Place of Business and	Contact Informat	ion			
Street Address 1		Street Address 2			
11742 Stonegate Circle					
<u> </u>	te/Province/Country	ZIP/Postal Code	Phone No.		
Omaha		68164 402-998-4000			
tem 3. Related Persons					
Last Name	First Name		Middle Name		
Snyder	Jonathan				
Street Address 1	<u>ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا </u>	Street Address 2			
3051 Traverse Creek Drive					
City State	Province/Country	ZIP/Postal Code			
Las Vegas NV		89135			
Relationship(s): X Executive Officer Di	rector Promoter		1444 484 144 484 444 444 444 444 444 444		
Clarification of Response (if Necessary)	<u> </u>		08066740		
(Identify adtem 4. Industry Group (Select one) Agriculture		s by checking this box 2	✓ and attaching Item 3 Continuation Page(s). ✓ Construction		
Banking and Financial Services	Energy		REITS & Finance		
Commercial Banking	\simeq -	tric Utilities	Residential		
Insurance Investing	$\overline{\mathcal{L}}$	gy Conservation Mining	Other Real Estate		
Investing Investment Banking	\sim	ronmental Services	Retailing		
Pooled Investment Fund	_	Gas	Restaurants		
If selecting this industry group, also select one	fund Othe	r Energy	Technology Computers		
type below and answer the question below: Hedge Fund	Health C		 Telecommunications 		
Private Equity Fund	\mathbf{v}	echnology th Insurance	Other Technology		
Venture Capital Fund		pitals & Physcians	Travel		
Other Investment Fund	<u> </u>	maceuticals	Airlines & Airports		
Is the issuer registered as an investment company under the Investment Compa	() (()	r Health Care	Lodging & Conventions Tourism & Travel Services		
Act of 1940? Yes No	Manufac	-	Other Travel		
Other Banking & Financial Services	Real Esta	i te mercial	Other		

U.S. Securities and Exchange Commission

Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)		Aggregate Net Asset Value Range (for issuer specifying "hedge" or "other investment" fund in Item 4 above)
O No Revenues	OR	No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1-\$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		S50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
O Decline to Disclose		O Decline to Disclose
O Not Applicable		O Not Applicable
tem 6. Federal Exemptions and Exclusions Cla	imed (Se	elect all that apply)
	vestment Cor	mpany Act Section 3(c)
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3	(c)(1) Section 3(c)(9)
Rule 504(b)(1)(i)	Section 3	(c)(2) Section 3(c)(10)
Rule 504(b)(1)(ii)	Section 3	(c)(3) Section 3(c)(11)
Rule 504(b)(1)(iii)	Section 3	S(c)(4) Section 3(c)(12)
Rule 505	Section 3	(c)(5) Section 3(c)(13)
Rule 506	Section 3	3(c)(6) Section 3(c)(14)
Securities Act Section 4(6)	Section 3	
tem 7. Type of Filing		
New Notice OR Amendmen	it	-
Pate of First Sale in this Offering: July 1, 2008	OD [First Sale Yet to Occur
ate of this sale in this offering. July 1, 2006	OR ∟	
tem 8. Duration of Offering		
tem 8. Duration of Offering Does the issuer intend this offering to last more than	one year?	☐ Yes 🔀 No
Does the issuer intend this offering to last more than	one year?	
Does the issuer intend this offering to last more than	all that app	
tem 9. Type(s) of Securities Offered (Select	all that app	ply)
Does the issuer intend this offering to last more than tem 9. Type(s) of Securities Offered (Select Equity Debt	Poole Tenar	ply) ed Investment Fund Interests
Does the issuer intend this offering to last more than tem 9. Type(s) of Securities Offered (Select Equity	Poole Tenar Miner	ply) ed Investment Fund Interests nt-in-Common Securities
Does the issuer intend this offering to last more than tem 9. Type(s) of Securities Offered (Select Equity Debt Option, Warrant or Other Right to Acquire	Poole Tenar Miner Other	ply) ed Investment Fund Interests nt-in-Common Securities ral Property Securities
Does the issuer intend this offering to last more than tem 9. Type(s) of Securities Offered (Select Equity Debt Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option,	Poole Tenar Miner Other	ply) ed Investment Fund Interests nt-in-Common Securities ral Property Securities (Describe)

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Ite	m 11.	Minimur	n Inves	tment															
•	/linimun	n investme	nt accept	ed from an	y outs	side ir	rvesto	or	\$	0]	
ite	m 12.	Sales Co	ompens	ation															
Reci	pient								_	Recip	oient Cl	RD N	lumber						
												_						No CRD	Number
Ass	ociated)	Broker or E	Dealer	×	None					(Asso	ciated	Bro	ker or De	ealer C	RD Nu	mber	-		
									\neg									No CRD	Number
Stre	eet Addr	ess 1								Street	Addre	ss 2							
City	/					_	State	/Provir	nce/	Count	ry [ZIP/	Postal Co	ode					
L												_			_				
Sta		olicitation		II States	_		_												
] AL] IL	☐AK ☐IN	□AZ □IA	☐ AR ☐ KS	<u> </u>	CA KY	=	CO LA	=	CT ME	DI M		☐ DC	~-	FL MI	_=-	GA MN	☐ HI ☐ MS	
	MT	□ NE	□ NV	NH	\dashv	NJ	– <u>≔</u> -	NM	=-	NY			☐ ND		OH		OK	OR	-
	RI	☐ sc	☐ SD	☐ TN		TX		UT		VT	□ VA		☐ WA		WV		WI	☐ WY	PR
				ional perso		-	aid co	mpen:	satio	on by	checkin	g th	is box	and	attach	ing Ite	em 12	Continu	ation Page
Ite	em 13.	. Offerin	g and S	ales Am	oun	ts													
	(a) Tota	al Offering	Amount		\$ 1,7	50,00	00							٦,	OR	П	Indef	inite	
					۔ ای										U I.	٠	maci	mite	
	(b) Total Amount Sold \$ 1,033,375						لِ												
		it Remainir btract (a) fro		old	\$ 710	6,625									OR		Inde	finite	
_	Clarifica	stion of Res	ponse (if N	ecessary)															
İ																			,
Į																			
ite	em 14.	Investo	rs																
	Check ti	his box 🔲 i	if securitie:	s in the offe	ering h	ave b	een o	r may l	be s	old to	person	s wh	no do not	t qualif	y as ac	credit	ed inv	estors, a	nd enter t
	number	of such no	n-accredit	ed investor	s who	alread	dy hav	ve inve	stec	d in the	e offeri	ng:							
													·			,			
	Enter th	e total nun	nber of inv	estors who	alread	dy hav	ve inv	ested i	n th	e offe	ring:	1	4						
lte	em 15.	Sales C	ommis	sions ar	nd Fir	ndei	rs' F	ees F	=×r	nense	29	_							
		separately he box next			comm	ission	is and	l finder	's' fe	es exp	enses,	if ar	ny. If an	amour	nt is no	t kno	wn, pr	ovide an	estimate
									S	ales C	ommiss	ions	s \$				7	☐ Feti	mate
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•	Clarificat	tion of Resp	onse (if Ne	cessary)						Fi	nders'	rees	i \$				ا	ESTI	mate
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Item 16. Use of Proceeds	
Provide the amount of the gross proceeds of the offering that has been or is used for payments to any of the persons required to be named as expected by the persons or promoters in response to Item 3 above. If the amount is unknestimate and check the box next to the amount.	ecutive officers, \$ [U
Clarification of Response (if Necessary)	·
Signature and Submission	
Please verify the information you have entered and review the To	erms of Submission below before signing and submitting this notice.
Terms of Submission. In Submitting this notice, each ide	entified issuer is:
the State in which the issuer maintains its principal place of bus process, and agreeing that these persons may accept service or such service may be made by registered or certified mail, in any against the issuer in any place subject to the jurisdiction of the activity in connection with the offering of securities that is the sprovisions of: (i) the Securities Act of 1933, the Securities Exchall Company Act of 1940, or the Investment Advisers Act of 1940, of State in which the issuer maintains its principal place of business.	ic and the Securities Administrator or other legally designated officer of siness and any State in which this notice is filed, as its agents for service of a its behalf, of any notice, process or pleading, and further agreeing that a Federal or state action, administrative proceeding, or arbitration brought United States, if the action, proceeding or arbitration (a) arises out of any subject of this notice, and (b) is founded, directly or indirectly, upon the ange Act of 1934, the Trust Indenture Act of 1939, the Investment or any rule or regulation under any of these statutes; or (ii) the laws of the
110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require "covered securities" for purposes of NSMIA, whether in all instances or	onal Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, re information. As a result, if the securities that are the subject of this Form D are due to the nature of the offering that is the subject of this Form D, States cannot e and can require offering materials only to the extent NSMIA permits them to do
	o be true, and has duly caused this notice to be signed on its behalf by the attach Signature Continuation Pages for signatures of issuers identified
Issuer(s)	Name of Signer
KeyOn Communications foldings, Inc.	Jason Lazar
Signature	Title
1/2 /2 /2 /2 /2 /2 /2 /2 /2 /2 /2 /2 /2 /	Vice President of Corporate Development and General Counsel
A I	Date

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Number of continuation pages attached:

12/04/08

U.S. Securities and Exchange Commission

Washington, DC 20549

Items 1 and 2 Continuation Page

Item 1 and 2. Issuer's Identity and Contact Information (Continued)

Name of Issuer	Previous Name(s) None	Entity Type (Select one)
KeyOn Communications Holdings, Inc.	Trevious Name(s)	Corporation
Jurisdiction of Incorporation/Organization		Limited Partnership
Delaware		Limited Liability Company
		General Partnership
Year of Incorporation/Organization (Select one)		Business Trust Other (Specify)
Over Five Years Ago Within Last Five Years (specify year)	2007 Yet to Be Formed	
At your option, supply separate contact informat	ion for this issuer:	
Street Address 1	Street Address 2	
City	State/Province/Country ZIP/Postal Code	Phone No.
Name of Issuer	Previous Name(s) None	Entity Type (Select one)
		Corporation
Jurisdiction of Incorporation/Organization		Limited Partnership
		Limited Liability Company General Partnership
Year of Incorporation/Organization		Business Trust
(Select one)		Other (Specify)
Over Five Years Ago Within Last Five Years (specify year)	Yet to Be Formed	
At your option, supply separate contact information	on for this issuer:	
Street Address 1	Street Address 2	
City	State/Province/Country 7IP/Postal Code	Phone No.
	State/Province/Country ZIP/Postal Code	Priorie No.
] [
Name of Issuer		
Name of issuer	Previous Name(s) None	Entity Type (Select one)
		Corporation
Jurisdiction of Incorporation/Organization		Limited Partnership
j		Limited Liability Company
		= -
		General Partnership Business Trust
(Select one) Over Five Years Ago Within Last Five Years		General Partnership
(Select one) Over Five Years Ago Within Last Five Years (specify year)	Yet to Be Formed	General Partnership Business Trust
(Select one) Over Five Years Ago Within Last Five Years (specify year) At your option, supply separate contact information	on for this issuer:	General Partnership Business Trust
Over Five Years Ago Within Last Five Years		General Partnership Business Trust
(Select one) Over Five Years Ago Within Last Five Years (specify year) At your option, supply separate contact information	on for this issuer:	General Partnership Business Trust
(Select one) Over Five Years Ago Within Last Five Years (specify year) At your option, supply separate contact information	on for this issuer:	General Partnership Business Trust
(Select one) Over Five Years Ago Within Last Five Years (specify year) At your option, supply separate contact information Street Address 1	on for this issuer: Street Address 2	General Partnership Business Trust Other (Specify)

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Item 3 Continuation Page

ast Name	First Name		Middle Name
inyder	Jerome		
treet Address 1		Street Address 2	
628 Scarsdale Avenue			
ity	State/Province/Country	ZIP/Postal Code	
as Vegas	NV	89117	
elationship(s): Executive Office	r 🕱 Director 🔲 Promoter		
larification of Response (if Necessary)			
ast Name	First Name		Middle Name
	Jason		
treet Address 1		Street Address 2	
925 Red Springs Drive			
ity	State/Province/Country	ZIP/Postal Code	
as Vegas	NV	89135	
elationship(s): X Executive Office	r Director Promoter		
-	T Director T Fromoter		
Clarification of Response (if Necessary)			
			
ast Name	First Name		Middle Name
			
treet Address 1		Street Address 2	
ity	State/Province/Country	ZIP/Postal Code	
]		
elationship(s): Executive Office	r Director Promoter	· · · · · · · · · · · · · · · · · · ·	
	T Director T Fromoter		
larification of Response (if Necessary)		<u> </u>	
			
_ast Name	First Name		Middle Name
		Street Address 2	
treet Address 1			
treet Address 1			
ity	State/Province/Country	ZIP/Postal Code	
	State/Province/Country	ZIP/Postal Code	

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Signature Continuation Page

Signature and Submission The undersigned is the duly authorized representative of the issuer(s), identied in the field beside the individual's name below. Name of Signer Issuer KeyOn Communications Holdings, Inc. Jason Lazar Signature Title Vice President of Corporate Development and General Counsel Date 12/04/08 Name of Signer Issuer Signature Title Date Issuer Name of Signer Signature Title Date Name of Signer Issuer Title Signature Date

Please see the below items as they are not fully displayed in the print version of the Form D.

Item 9-

"These subordinated secured notes have a conversion feature upon the occurrence of a "change of control transaction" or "sale of securities" as defined therein."

Item 10-

"The "change of control transaction" implicates the conversion feature as defined above, but the offering is not being made in connection with a business combination."

Jason Lazar KeyOn Communications, Inc. 4061 Dean Martin Drive Las Vegas, NV 89103 Tel. 702-949-3570 x 225 Fax. 702-949-3579 Mob. 310-403-6307 www.keyon.com

